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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/711,834
Filing Date	November 13, 2000
First Named Inventor	Henrik Jakobsen
Group Art Unit	1775
Examiner Name	G. Blackwell Rudasil
Attorney Docket Number	352.007

Total Number of Pages in This Submission 8

## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Notification of Missing Requirements Under 35 USC 371 <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 DECLARATION	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Formal Drawings <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Andrew S. McConnell, Registration No. 32,272 Boyle, Fredrickson, Newholm, Stein & Gratz, S.C.
Signature	<i>Andrew S. McConnell</i>
Date	12/24/03

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: 12-24-03			
Type or printed name	Dawn M. Oleszak		
Signature	<i>Dawn M. Oleszak</i>	Date	Dec. 24, 2003

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# FEE TRANSMITTAL

## for FY 2002

Patent fees are subject to annual revision.

Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$65.00)

## Complete if Known

Application Number 09/711,834  
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 Examiner Name G. Blackwell Rudasil  
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## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

 Deposit Account Number  
 Deposit Account Name

50-1170

Boyle, Fredrickson, Newholm, Stein &amp; Gratz S.C.

The Commissioner is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
101	770	201	385	Utility filing fee	
106	340	206	170	Design filing fee	
107	530	207	265	Plant filing fee	
108	770	208	385	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1) (\$0)

## 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims		Extra Claims		Fee from below		Fee Paid
Independent Claims	20	-33**=	0	X	18.00	0
Multiple Dependent Claims	5	-3**=	2	X	86.00	172.00

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
103	18	203	9	Claims in excess of 20	
102	86	202	43	Independent claims in excess of 3	
104	290	204	145	Multiple dependent claim, if not paid	
109	86	209	43	**Reissue independent claims over original patent	
110	18	210	9	**Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$172.00)

\*\* or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee	Fee	Fee	Fee		
105	130	205	65	Surcharge - late filing fee or oath	
127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
139	130	139	130	Non-English specification	
147	2,520	147	2,520	For filing a request for <i>ex parte</i> reexamination	
112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
115	110	215	55	Extension for reply within first month	
116	420	216	210	Extension for reply within second month	
117	950	217	475	Extension for reply within third month	
118	1,480	218	740	Extension for reply within fourth month	
128	2,010	228	1,005	Extension for reply within fifth month	
119	330	219	165	Notice of Appeal	
120	330	220	165	Filing a brief in support of an appeal	
121	290	221	145	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,330	241	665	Petition to revive - unintentional	
142	1,330	242	665	Utility issue fee (or reissue)	
143	480	243	240	Design issue fee	
144	640	244	320	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17(q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
146	770	246	385	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	770	249	385	For each additional invention to be examined (37 CFR § 1.129(b))	
179	770	279	385	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$0)

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type) Mathew E. Corr Registration No. (Attorney/Agent) 45.434 Telephone 414-225-9755  
 Signature [Signature] Date 12/24/03

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